

SCHEDULE 9

ELECTRONIC FUNDS TRANSFER INSTRUCTIONS

MASTER SERVICES AGREEMENT

REGARDING

DIVISION OF FAMILY RESOURCES MODERNIZATION PROJECT

By and Between

THE STATE OF INDIANA,

ACTING ON BEHALF OF

THE FAMILY AND SOCIAL SERVICES ADMINISTRATION,

And

INTERNATIONAL BUSINESS MACHINES CORPORATION

SCHEDULE 9
ELECTRONIC FUNDS TRANSFER INSTRUCTIONS

International Business Machines Corporation (“IBM”) authorizes State of Indiana to initiate credit entries, electronically or by any other commercially accepted method, and if necessary, to initiate adjusting entries to correct credits processed in error to our bank account set forth below. All adjusting entries must be processed in accordance with the National Automated Clearing House Association (“NACHA”).

This authorization shall remain in full force and effect until IBM has furnished the State, as our Customer, with written notification of any change or cancellation.

<u>IBM Bank Information</u>	<u>Contact Information</u>
<u>Bank Name:</u> PNC Bank <u>Bank Address:</u> 500 1st Avenue Pittsburgh, PA 15219 <u>Bank Account Number:</u> 1017305737 – fulfillment <u>Bank Account Name:</u> IBM Corp/Checking <u>Bank ABA Routing Number:</u> 043000096 <u>Tax ID Number:</u> 13-0871985	<u>IBM Contact Name:</u> Diane Taylor <u>IBM Contact Phone:</u> 919-517-0420 <u>Email:</u> necrsc@us.ibm.com <u>Bank Phone Number:</u> 800-762-4224

|| xx Add Deposit || Change Deposit || Stop Deposit

State Form 47551 (R3 / 12-05) Approved by State Board of Accounts,
2005



STATE OF INDIANA AUTOMATED DIRECT DEPOSIT AUTHORIZATION AGREEMENT

Instructions:

- 1 Vendor/claimant will complete first section and have its financial institution complete Section 2.
- 2 The financial institution will complete Section 2 and return to the vendor/claimant.
- 3 Vendor/claimant will file completed form with Auditor of State, 200 West Washington St., Room 240, Indianapolis, IN 46204-2728
- 4 Vendor/claimant and financial institution should retain a copy. Additional blank copies are available from Auditor of State at <http://www.in.gov/auditor/forms>.

SECTION 1: REQUEST AND AUTHORIZATION

IBM Corporation

Tax ID 13-0871985

Vendor / Claimant as shown on the account

Federal I.D. Number / Social Security Number

New Orchard Road

Armonk, NY 10504

Address (Number and Street, and/or P.O. Box No.)

City, State, and Zip Code (00000-0000)

requests, pursuant to IC 4-8.1-2-7(d), to receive payment(s) by means of electronic transfer of funds, and authorizes the same under the terms stated herein.

It is understood by the undersigned Vendor/Claimant that, if approved, the State of Indiana may (1) initiate credit (deposits) in various amounts, by electronic transfer of funds through automated clearing house (ACH) processes, to the below listed checking (demand) or savings account designated in the financial institution named below, and, (2) if necessary, the Vendor/Claimant will accept reversals from the State for any credit entries made in error to a bank account per NACHA regulations. The Vendor/Claimant may revoke this request and authorization by notifying the Auditor of State in writing at least fifteen (15) days prior to the effective date of revocation. Any change to the account or to a new financial institution will require a new State of Indiana Automated Direct Deposit Authorization Agreement. Failure to timely notify the Auditor of an account change will delay payment.

Name of Financial Institution: PNC Bank

Type of Account: xx Checking (Demand) Savings

Financial Institution Account Number: Bank Account Number IBM Corp/Checking 1017305737 – fulfillment

Date

Peggy Anthony
Signature of Vendor / Claimant

SECTION 2: FINANCIAL INSTITUTION'S APPROVAL

Name of Financial Institution: PNC Bank

Phone: (800) 762-4224

The financial institution identified below agrees to accept automated deposits under the terms set forth herein.

Address:

500 1st Avenue

(Number and Street, and/or P.O. Box No.)

Pittsburgh, PA 15219-3128

(City, State, and Zip code (00000-0000))

Date

Donna Haber *see attached ref "pnc document.pdf"
Financial Institution's Authorized Signature

043000096

ABA Transit-Routing Number

Assistant Vice President
Title